

Substitution for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>			Complete If Known	
Sheet <input type="text"/> of <input type="text"/>			Application Number	
			Filing Date	
			First Named Inventor	ROE, Gary T. et al
			Art Unit	
			Examiner Name	
			Attorney Docket Number	4017M

[illegible]

Examiner Signature	Anita King	Date Considered	6/13/04
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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